

# FEC FORM 2

## STATEMENT OF CANDIDACY

1. (a) Name of Candidate (in full)

David Schweikert

(b) Address (number and street)

15749 E El Lago Blvd

(c) City, State and ZIP Code

Fountain Hills

AZ

85268-3901

☐ Check if address changed

2. Identification Number

H4AZ06045

3. Is This Statement

☐ New (N)

OR

☒ Amended (A)

4. Party Affiliation

REPUBLICAN PARTY

5. Office Sought

House

6. State &amp; District of Candidate

AZ 05

### DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE

7. I hereby designate the following named political committee as my Principal Campaign Committee for the 2010 election(s).  
(year of election)

**NOTE:** This designation should be filed with the appropriate office listed in the instructions.

(a) Name of Committee (in full)

David Schweikert For Congress

(b) Address (number and street)

15749 E El Lago Blvd

(c) City, State and ZIP Code

Fountain Hills

AZ

85268

### DESIGNATION OF OTHER AUTHORIZED COMMITTEES

(Including Joint Fundraising Representatives)

8. I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my candidacy.

**NOTE:** This designation should be filed with the principal campaign committee.

(a) Name of Committee (in full)

Gosar, Schweikert, Kelly Victory Committee

(b) Address (number and street)

P.O. Box 365

(c) City, State and ZIP Code

McLean

VA

22101

I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct, and complete.

Signature of Candidate

David Schweikert

Date

10/18/2010

**NOTE:** Submission of false, erroneous or incomplete information may subject the person signing this Statement to penalties of 2 U.S.C. §437g.

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**DESIGNATION OF OTHER AUTHORIZED COMMITTEES****[ ADDITIONAL ]**

(Including Joint Fundraising Representatives)

I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my candidacy.

**NOTE:** This designation should be filed with the principal campaign committee.

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(a) Name of Committee (in full)

Founders Joint Candidate Committee II

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(b) Address (number and street)

228 S Washtington Street #115

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(c) City, State and ZIP Code

Alexandria

22314

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**DESIGNATION OF OTHER AUTHORIZED COMMITTEES****[ ADDITIONAL ]**

(Including Joint Fundraising Representatives)

I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my candidacy.

**NOTE:** This designation should be filed with the principal campaign committee.

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(a) Name of Committee (in full)

Arizona Majority Committee

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(b) Address (number and street)

P.O. Box 365

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(c) City, State and ZIP Code

McLean

22101

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**DESIGNATION OF OTHER AUTHORIZED COMMITTEES****[ ADDITIONAL ]**

(Including Joint Fundraising Representatives)

I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my candidacy.

**NOTE:** This designation should be filed with the principal campaign committee.

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(a) Name of Committee (in full)

Grand Canyon State Leadership Fund

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(b) Address (number and street)

P.O. Box 365

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(c) City, State and ZIP Code

McLean

22101